

CLAIMS ONLY							Application Number <u>106786178</u>		Filing Date			
							Applicant(s)					
							* May be used for additional claims or amendments					
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT							
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1							51					
2							52					
3							53					
4							54					
5							55					
6							56					
7							57					
8							58					
9							59					
10							60					
11							61					
12	/						62					
13		/					63					
14		/					64					
15		/					65					
16		/					66					
17		/					67					
18		/					68					
19	/						69					
20		/					70					
21		/					71					
22		/					72					
23	/						73					
24		/					74					
25		/					75					
26		/					76					
27		/					77					
28		/					78					
29	/						79					
30		/					80					
31		/					81					
32		/					82					
33		/					83					
34	/						84					
35		/					85					
36		/					86					
37		/					87					
38	/						88					
39		/					89					
40		/					90					
41		/					91					
42	/						92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
Total							Total					
Indep							Indep					
Total							Total					
Depend							Depend					
Total							Total					
Claims							Claims					